



CALIFORNIA NETWORK OF MENTAL HEALTH CLIENTS

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RESOURCES FOR TRAUMA-INFORMED CARE:

A SUPPLEMENT TO THE MAY 2008 POLICY REPORT OF THE CALIFORNIA NETWORK OF MENTAL HEALTH CLIENTS (CNMHC) TO THE MENTAL HEALTH SERVICES OVERSIGHT AND ACCOUNTABILITY COMMISSION (OAC)

TRAUMA-INFORMED PRINCIPLES, EDUCATION AND TRAINING

- ✱ **The US Center for Mental Health Services (CMHS) National Center for Trauma Informed Care (NCTIC)** offers some excellent online, print and face-to-face educational resources, including:
 - **Information about trauma-informed care** and links to various trauma-specific intervention programs. <http://mentalhealth.samhsa.gov/nctic/trauma.asp>
 - **A fact sheet**, “Person-First Approach to Healing”, with a guide to language and engagement styles that support the journey to healing and wellness for consumers and survivors of trauma. http://download.ncadi.samhsa.gov/ken/pdf/NCTIC/FS_PersonFirstLanguage.pdf
 - **Trauma training and technical assistance** free or low-cost to publicly funded health and human service systems and programs throughout the U.S. <http://mentalhealth.samhsa.gov/nctic/training.asp>
 - **A speakers bureau** featuring some of the nation’s foremost experts on trauma, recovery and related subjects, including intergenerational trauma expert Jacki McKinney and alternatives to seclusion and restraints expert Joan Gillece. <http://mentalhealth.samhsa.gov/nctic/speakers.asp>
- ✱ **Risking Connection** is a training program developed by the Sidran Traumatic Stress Institute that provides mental health professionals and other service providers with a philosophy and method for working with clients who are survivors of childhood abuse and trauma. It offers a trauma framework that empowers service providers as well as survivors. <http://www.riskingconnection.org/default.htm>
<http://www.sidran.org/sub.cfm?contentID=129§ionid=7>
 - **Risking Connection training manuals** are available in print for mental health, public health and substance abuse staff to support survivors of childhood abuse, as well as for faith leaders supporting trauma survivors. http://www.sidran.org/store/index.cfm?fuseaction=product.display&product_id=121
http://www.sidran.org/store/index.cfm?fuseaction=product.display&product_id=9
 - **Trauma, Addiction, Mental Health, And Recovery (TAMAR)**, a collaborative project between the Sidran Institute, the Maryland Mental Health Administration and the University of Maryland Center for Mental Health Services Research as part of the federally funded multi-state “Women, Co-Occurring Disorders, and Violence” study, developed and delivered trainings based on the Risking Connection approach for corrections, parole and probation, substance abuse, mental health, domestic violence, and social services staff working with women who had histories of traumatic abuse as well as co-occurring mental health and substance abuse diagnoses in jail and in community settings after their release. The idea was to create a truly trauma-informed support system for the women, at all stages of their recovery. <http://www.sidran.org/sub.cfm?contentID=47§ionid=7>
- ✱ **Veterans and Trauma: “About Post Traumatic Stress Disorder (PTSD) and Brain Injury in Iraq’s War Veterans”** by Katherine van Wormer summarizes key facts about the long-term effects of combat-related trauma facing veterans returning from Iraq and Afghanistan. <http://www.helpstartshere.org/Default.aspx?PageID=1289>

- **The US Department of Veterans' Affairs' (VA) National Center for Post-Traumatic Stress Disorder (PTSD)** fact sheet points to the need for trauma-informed suicide prevention programs. The Center reports “a large body of research indicates that there is a correlation between PTSD and suicide. There is evidence that traumatic events such as sexual abuse, combat trauma, rape, and domestic violence generally increase a person's suicide risk.”

http://www.ncptsd.va.gov/ncmain/ncdocs/fact_shts/fs_ptsd_and_suicideprof.html?opm=1&rr=rr1367&srt=d&echorr=true

- ✱ **Trauma-Informed LGBTQ Youth Suicide Prevention Strategies: “Gay, Lesbian, Bisexual, Transgender Youth Suicide,”** a white paper by Warren J. Blumenfeld and Laurie Lindop, provides an overview of data from many studies that have linked LGBTQ youth suicide attempts and completions to the trauma of surviving in a hostile environment that exposes sexual minority youth to attacks when they do not conform to heterosexist expectations of sexual orientation and gender identity, and recommends LGBTQ youth-specific intervention strategies that emphasize acceptance and accurate education about LGBTQ issues, and initiating dialogue with students on suicide in a non-judgmental way in order to “uncloset” the taboo subject of suicide. http://www.outproud.org/article_suicide.html

- **“Suicide Prevention Current Trends - Risk Factors and Intervention Strategies for Gay, Lesbian, Bisexual and Transgender Youth”** by Michael Langlois, points out that when clinicians address issues of sexual orientation, they must grapple with whose side to take in resolving traumatic events of human design, an often uncomfortable, politically charged decision that pits the needs of survivors (their clients) against the wishes of perpetrators of anti-LGBT violence (who may be the clients’ peer, a parent, and/or a professional, a school, community, society, or nation) that the clinician follow the path of least resistance and take no action. When they choose to do nothing, clinicians themselves become risk factors in youth suicide. Instead, Langlois urges clinicians to become allies: “Sensitivity at first contact is crucial. Nothing less is required than the conveyance of empathy, provision of information regarding supportive community resources along with the instillation of hope. All of this occurs within the context of standing alongside the adolescent in a world which at best denies his or her existence and at worst seeks to eradicate it.” <http://www.helpstartshere.org/Default.aspx?PageID=1182>

- **“Gender Non-Conforming Youth and Sexual Assault”** by Shannon Wyss tells the story of a butch teenage girl who survived repeated sexual assault, hate violence and a suicide attempt. To prevent the traumas that so often lead LGBTQ youth to attempt suicide, Wyss urges rape prevention organizations to include butch, effeminate, transgender and genderqueer teens in their education and advocacy work. <http://www.survivorproject.org/wyss.html>

MODEL TRAUMA-INFORMED AND TRAUMA-SPECIFIC PROGRAMS

- ✱ **The National Technical Assistance Center for State Mental Health Planning (NTAC) of the National Association of State Mental Health Program Directors (NASMHPD)** released an extensive report, “Models for Developing Trauma-Informed Behavioral Health Systems and Trauma-Specific Services” (2004) that identifies criteria for building a trauma-informed mental health system, summarizes the evolution of trauma-informed and trauma-specific services in state mental health systems, and describes a range of trauma-based service models and approaches implemented by increasing numbers of state systems and localities across the country, including models for developing trauma-informed service systems and organizations, individual trauma-informed service models and trauma-specific service models for adults, parenting, children, peer support and self help models, complete with information on research studies and findings regarding specific service interventions. www.annafoundation.org/MDT.pdf
- ✱ **Stepping Stone Peer Support Crisis Respite Center** in Claremont, NH, has offered, for over 10 years, a 24-hour, non-medical, consumer-run safe haven in which people in emotional distress can “learn from,

and be supported in making the transition from crisis to wellness.” The all-consumer staff’s unique combination of experiential knowledge and trauma-informed training have greatly reduced the use of more restrictive hospital settings, including involuntary admissions, which studies show have are often a source of trauma for many clients. <http://www.steppingstonenextstep.org/8.html>

- ✱ **Similar consumer-run crisis respite programs** exist in three other states:
 - **Our Place**, Lancaster, OH. Executive Director Patricia Waits pawaits@ohiopps.org
 - **Rose House**, Hilton, NY. www.charityadvantage.com/people/RoseHouse.asp
 - **Sweetser Learning & Recovery Center**, Brunswick, ME. sweetser.worldpath.net//peers.aspx
- ✱ **The Essence of Being Real**, developed by the Sidran Institute, is a peer-to-peer educational framework to address the effects of trauma, designed for survivor groups (including abuse, disaster, crime, shelter populations, and others), first responders, and frontline service providers and agency staff, geared to promoting relationships rather than focusing on the “bad stuff that happened.” For more information, visit http://www.sidran.org/store/index.cfm?fuseaction=product.display&product_id=151 or contact Elaine Witman at elaine.witman@sidran.org
- ✱ **Trauma-Informed Services for Veterans: The Testimony of Toni Reinis**, Executive Director of New Directions, Inc. of Los Angeles to the US Congressional Committee on Oversight and Government Reform offers many insights on ways to engage and support war veterans with post-traumatic stress disorder (PTSD) using trauma-informed, alternative approaches. “...It is the human connection that is critical to this healing process for PTSD. At New Directions, for instance, we are using integrative therapies such as yoga, art, poetry and theater arts to assist with relaxation techniques and engagement of mind and body.” Reinis recommends permanent supportive housing for disabled veterans and transforming the VA mental health system to a trauma-informed model. oversight.house.gov/documents/20070524141936.pdf
- ✱ **“Teen Line Reaches Out To LGBT Youth”** by Elaine Leader highlights a successful outreach program in Los Angeles in which LGBT youth educate all youth on these issues, “providing an opportunity for questions and discussion of the challenges, prejudices, difficulties and, even rewards, involved in ‘growing up gay.’”
http://www.clinicalsocialworksociety.org/included/docs/continuing_education/TeenLine.pdf
 - **“Suicide Prevention - How Social Workers Help: Preventing Suicide in Gay, Lesbian, Bisexual, and Transgender Youth”** by Katherine van Wormer outlines many of the traumatic social issues facing LBGT youth, including harassment in school, rejection at home, and homelessness, and some model prevention programs, including gay/straight alliances, educational panels, and anti-bullying programs. <http://www.helpstartshere.org/Default.aspx?PageID=1291>

STRATEGIES FOR ENDING THE TRAUMATIZATION OF CLIENTS IN MENTAL HEALTH SETTINGS

- ✱ **Promote and implement trauma-informed alternatives to forced treatment** for persons who are coping with trauma, such as active listening and harm reduction, and building connections with persons living with self-inflicted violence (SIV) based on mutual respect. SAMHSA has released a fact sheet on Understanding Self-Injury. http://download.ncadi.samhsa.gov/ken/pdf/NCTIC/FS_SelfInjury.pdf
- ✱ **Gender-specific trauma-informed services** are essential for women and girls who are dually diagnosed with mental health and substance use disorders, for whom traumas related to interpersonal violence, rape, sexual coercion, and childhood sexual abuse are major risk factors. Niki Miller’s white paper “Consideration of Gender Specific Factors in the Development of Adolescent Alcohol and Other Drug Interventions and Treatment” outlines key criteria for adopting trauma-informed practices to prevent retraumatization in substance abuse services for women and girls; similar practices are needed in

integrated mental health services for women and girls who are dually diagnosed.

http://nhtwr.org/publications/adogirls6-29-04_copyright.pdf

- ✱ **Eliminate the use of restraints and seclusion** in locked facilities. Several recent publications include:
 - **Restraint and Seclusion: A Risk Management Guide**, produced by the National Association of State Mental Health Program Directors (NASMHPD), aims to prevent, reduce, and ultimately eliminate the use of seclusion and restraints, in order to prevent “serious injury or death, retraumatization of people who have a history of trauma, and loss of dignity and other psychological harm.”
www.power2u.org/downloads/R-S%20Risk%20Manag%20Guide%20Oct%2006.pdf
 - **Roadmap to Seclusion and Restraint Free Mental Health Services** is a recently released SAMHSA training curriculum to give mental health providers the latest information on prevention strategies and alternative approaches to avoid and reduce the use of seclusion and restraint. **<http://mentalhealth.samhsa.gov/publications/allpubs/sma06-4055/>**
- ✱ **Client/survivor-led education and training** holds great promise as a tool to foster meaningful and effective consumer/provider relationships, reduce and end traumatization in mental health settings, and is highly recommended for mental health and medical service providers, mental health departments, boards and commissions, undergraduate and graduate students in psychiatry, psychology, social work, medicine and public health. Contact the CNMHC for more info.